

1 of 2

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

101566,623

FILING DATE

01-30-06

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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49						
50						
TOTAL IND.			↓		↓	
TOTAL DEP.			←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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92						/
93						/
94						/
95					/	
96					/	
97					/	
98					/	
99					/	
100					/	
TOTAL IND.				↓		
TOTAL DEP.			←		←	
TOTAL CLAIMS						

20f2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>101566,623</b>	FILING DATE <b>01-30-06</b>					
							CLAIMS						
	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT			AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101				1			151						
102				1			152						
103				1			153						
104				1			154						
105				1			155						
106				1			156						
107			1				157						
108			1				158						
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112			1				162						
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142							192						
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145							195						
146							196						
147							197						
148							198						
149							199						
150							200						
TOTAL IND.			7				TOTAL IND.						
TOTAL DEP.		43					TOTAL DEP.						
TOTAL CLAIMS		50					TOTAL CLAIMS						